

TUTBURY RURAL DISTRICT COUNCIL.

ANNUAL REPORT

OF

MEDICAL OFFICER OF HEALTH,

FOR THE YEAR 1896.

Presented to the Tutbury Rural District Council, 11th March, 1897,
and ordered to be printed.

C. F. CHAMBERLIN,

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TUTBURY, BURTON-ON-TRENT,

MARCH 7TH, 1897.

To the Chairman and Members of the Tutbury Rural District Council.

GENTLEMEN,

I beg to present you with my Report for the year 1896, and following the plan I adopted last year, I will first draw your attention to the vital statistics, together with the corresponding figures for 1895, so that the difference may be noted at a glance; afterwards giving an account of the working of The Notification of Infectious Diseases Act, and of the various epidemics which appeared in the district; finally giving a short summary of the sanitary work done in the various parishes, with some suggestions for further improvements.

The District, as you know, comprises ten parishes, together with that portion of Horninglow not included within the Borough of Burton-on-Trent.

Area in Acres—25,916.

Population.—In 1891... .. 9031
Estimated to middle of 1896 9325

Number of Births during the year—

Males	... 135	} 1896	143	} 1895
Females	... 140		116	
Total	... 275		259	
Rate per 1000 ... 1896—29·4 ... 1895—27·7				

Number of Deaths—

Males	... 73	} 1896	73	} 1895
Females	... 73		76	
Total	... 146		149	
Rate per 1000 ... 1896—15·6 ... 1895—15·9				

Infantile Mortality (Deaths under one year)—

1896—38.	1895—40.
26·02 per cent. of the total number of deaths, or 138·1 per 1000 births in 1896.	26·8 per cent. of the total number of deaths, or 154·4 per 1000 births in 1895.

Zymotic Disease caused 12 deaths, equivalent to 1·2 per 1000 of the population in 1896. In 1895 4 deaths, being equal to 0·4 per 1000.

DETAILED CAUSES.

	1896.	1895.
Scarlet Fever	11	3
Typhoid Fever	1	1
Membranous Croup	0	1
Measles	5	0
Diarrhœa and Dysentery	0	3
Phthisis	8	14
Rheumatic Fever... ..	1	0
Bronchitis, Pneumonia, Pleurisy ...	23	23
Heart Disease	15	25
Injuries	0	1
All other diseases	82	78

Influenza of a mild type was prevalent in the early part of the year, disappearing in the spring to re-appear during the last three months of the year. Two deaths were ascribed to this disease.

Measles was extremely prevalent in the district in the middle and last quarters of the year. Five deaths from this cause being certified.

In Branstone parish especially the epidemic was severe and prolonged, necessitating the closure of the school.

Special difficulties are attached to the prevention of Measles:—First, its extremely infectious character, especially in its earlier stages, before an accurate diagnosis of the complaint can be made; secondly, the disposition of the public in general to lightly estimate its dangers and importance; and early closure of Schools (including of course Sunday Schools), and the prevention of the assemblage of children for any object (worship, amusement, &c.) whatever.

Compulsory notification might be attended by good results, but the benefit which attaches to the notification of Scarlet Fever could hardly be attained in this disease, the reason being (as I have already said) that it is infectious during the early stages before its exact nature is made out; and then again its dangers not being sufficiently realized, many cases are not medically attended. “It is only Measles” being far too common an expression.

As a matter of fact of recent years, taking the country generally, Measles has caused more deaths than Scarlet Fever, Small Pox, or Diphtheria.

Notification of Infectious Diseases. I may perhaps remind you that the diseases included in this Act are: Scarlet Fever, Small-pox, Diphtheria, Membranous Croup, Erysipelas, Cholera, Typhoid Fever, Typhus Fever, and Puerperal Fever.

On the whole I think the administration of the Act in this District has been attended by good results, making allowance for the difficulties which at present attend the proper isolation of cases among the poorer classes.

On the receipt of each Notification I visit the infected house in company with Mr. May, your Inspector, and endeavour to trace the source of infection. In many cases we are enabled to do this. In every case we do our utmost to prevent the disease becoming epidemic. Disinfectants are freely supplied, and Mr. May personally superintends the disinfection of the house and household on the termination of the illness.

I think if I place before you the date of each Notification, you may perhaps appreciate the connection (if any) between the different outbreaks.

SCARLET FEVER—39 Cases.

January 9. Two cases reported from a house in Branstone Road, near the Borough of Burton-on-Trent. The disease was contracted at a private school in Burton.

The drains of the premises were examined and found to be in a defective condition. The owner was communicated with and the matter put right.

February 29. One case reported from Castle Street, Tutbury. The patient, a school-teacher, contracted the disease at Little Eaton.

April 5. Three cases notified from a house on the Rolleston Road. The infection was conveyed by a Nurse who had been attached to the Borough Hospital, on leaving the Hospital she had lodged in this house.

April 10. Four cases reported from a house in Stretton. Disease contracted from a girl who had come from an infected house in Horninglow.

Mr. May by his promptitude in preventing a boy who lived in the house, selling the Burton Evening Papers, probably averted what might have been a serious epidemic. This boy subsequently developed the disease.

April 17. One case reported from another house in Stretton. Disease contracted as in the preceding case.

April 19. Two more cases notified as occurring in the house at Stretton from which the first cases were reported.

April 19. One case reported from a house in New Row, Rolleston. Infection in this case was traced to the cases in Rolleston Road, reported on April 5th.

April 21. One case reported from Rolleston. Disease contracted as in previous case.

May 18. Three cases notified from The Lount, Anslow. A child from this house had visited the New Row, Rolleston, and no doubt contracted the fever from the case previously reported from there.

June 26. Five cases reported from Wichnor. Infection was traced to some children attending school who undoubtedly had Scarlet Fever, of so mild a type as to escape notice. Two of these five cases occurred in a farm house. I visited the place in company with Mr. May, and prohibited the farmer sending his milk to Birmingham. As I mentioned in a former report, wide-spread epidemics of Scarlet Fever in large towns have often been traced to an infected country dairy, this being a strong plea for compulsory notification.

August 16. Two cases reported from Anslow. Infection was traced to Horninglow.

September 14. One case notified from Barton Green. Disease probably contracted at Burton.

September 18. One case reported from Shobnall Road. Infection in this case being traced to an infected house in that part of the same Road within the Borough.

September 19. One case notified from Anslow. The child had a few days previously come from Burslem where no doubt the disease was contracted.

September 22. Two cases notified from Rangemore. Disease contracted from a boy attending the Rangemore school, who was subsequently discovered to have been suffering from Scarlet Fever, and to have been going to school whilst desquamating.

October 4. Five cases reported from Rangemore. Infection as in previous cases.

October 6. One case from Tatenhill Common.

October 6. Three cases from Dunstall. Infection contracted at Rangemore.

TYPHOID FEVER.—2 Cases.

August 14. One case notified from Shobnall Road. The sanitary condition of the premises was found satisfactory. By my direction a sample of water was taken and submitted to Mr. Cartmell for analysis, and was found to be good.

August 31. One case reported from another house in Shobnall Road. No defective drainage was found. The water was analysed and as in the previous case was good.

Shortly before the occurrence of these two cases several very foul privies and ashpits were emptied in the immediate neighbourhood, and to this I attributed the outbreak.

DIPHTHERIA.—1 Case.

November 17. This case occurred at a farm house in Rolleston. Three samples of water were taken, and submitted to analysis. One from a tap in the house, one from a well in the yard, and one from a spring a short distance away. All these samples contained more or less organic matter and cannot be classed as good.

The following is a Short Summary of the Sanitary Condition of the various Parishes in the District.

Anslow.—Area in acres, 1492. A number of nuisances were discovered in this Parish, and dealt with by your Inspector. There are several privies existing, in my opinion, too close to the public highway, and in dangerous proximity to some of the wells. I recommend that all old privies under these conditions be abolished as nuisances under 91st Section of the Public Health Act. And when found to be close to the various wells, that the pan and earth system be enforced.

The privies attached to the Anslow Schools, as I pointed out to you some time ago, are much too close to the school premises, and constitute a dangerous nuisance. I should strongly recommend that these be pulled down and new offices erected further away.

Barton-under-Needwood.—Area in acres, 3798. Many nuisances were discovered and abated on action being taken. On several occasions I have visited this parish with your Inspector. Judging by the quantity of drainage matter that flows into the Brook (adjoining the property) from White's Row, the Brook must be seriously polluted. A brook at the Efflinch also is being seriously polluted by drainage matter from a number of houses. I would therefore suggest that the main sewers be extended to the neighbourhoods named, with a view of the various houses being drained into same, and cut off entirely from the brooks. I would also recommend that some of the well water in this parish be analysed.

In other respects the parish is in a good sanitary condition.

Branstone.—Area in acres, 2328. I visited this parish in company with Mr. May, and inspected the property on the Branstone Road, from the Leicester Line Bridge to the Midland Railway Station. The brook or ditch which receives the drainage

of the property in question, was in a most filthy condition, water-closets, as well as sinks and other drains, being discharged into it. This foul ditch does not appear to have any flow in any direction. In its present state it is likely to prove most dangerous to health, and at any time may give rise to a serious outbreak of Typhoid Fever.

This is a matter in which your Council should take prompt action, with a view to adopting a proper system of drainage. The ditch requires to be thoroughly emptied and cleansed; and in this, as in other parishes where there are no sewers, and where drainage is difficult to carry out, the earth and pan system of closet should be adopted.

Dunstall.—Area in acres, 1706. This parish is in a good sanitary condition. In the last quarter of the year the schools were closed and disinfected owing to the outbreak of Scarlet Fever.

Hanbury.—Area in acres, 3181. No infectious case was notified during the year. I have visited the parish with Mr. May and find that, although the Parish Council has sunk several wells, there is no improvement in the supply.

I should recommend you to bore for water, and even if only one well can be made, the overflow or waste could be distributed to different parts of the parish.

Outwoods.—Area in acres, 1051. As I have already mentioned, two cases of Typhoid Fever were reported from Shobnall Road. The cause of the outbreak I have also pointed out to you. The parish now is in a fair sanitary condition.

Rolleston.—Area in acres, 3000. There is no system of drainage in this parish. Several nuisances have been dealt with.

Stretton.—Area in acres, 1210. This parish is well supplied with water, many houses being connected with the South Staffordshire mains; and altogether the village is in good sanitary condition.

Tatenhill.—Area in acres, 2458. I would urge you to have a proper system of sewerage carried out in this parish at an early date. The drainage from nearly all the houses is discharged into the brook, causing serious pollution.

Tutbury.—Area in acres, 4092. This parish is not in a good sanitary condition. There are many defective and worn-out drains. These cannot very well be put right until the New Scheme of Sewerage has been carried out, as anything done now would mean double expense to property owners.

When this Scheme is accomplished, and when the Parish Council undertakes the removal of all house refuse, the parish will be in a more favourable sanitary condition than at present.

Isolation Hospital.—I would remind your Authority that the provision of a hospital for infectious diseases (apart from Small-pox) is of the utmost importance. An adequate expenditure in this direction being, I am convinced, the truest economy. At present it is most difficult to ensure efficient isolation in the houses of the poorer classes. But this matter is, I believe, engaging the attention of a sub-committee of your Council, and in the near future the district will, I trust, be provided with this necessary adjunct to the means at our disposal in dealing with preventible disease.

This system has been adopted in about 600 of the sanitary districts of England and Wales. The number of medical men and sanitarians that accord it their support is endless, and I am not aware of a single leading authority that condemns it.

Small-pox cannot be treated in the same block of buildings as the other infectious Fevers, and a small-pox hospital should be removed as far as possible from any habitation, as infection spreads to a considerable distance. Although this is the most awful, it is the most preventible of acute diseases. And I may be permitted to mention that Vaccination is the surest, and in fact the only preventive, and hence the Vaccination laws should be strictly enforced.

In conclusion, I might suggest, as a further precaution, that all the Schools in the District be disinfected during the Christmas and Midsummer holidays. This your Inspector would undertake to do, and would, I am sure, be well worth any little trouble and extra expense incurred.

I append the Tables required by the Local Government Board, as well as a statement of the work done by Mr. May, to whose valuable aid I desire to bear testimony.

I am, Gentlemen,

Your obedient Servant,

KILDARE D. B. DOBBS,

MEDICAL OFFICER OF HEALTH.

A TABLE OF DEATHS during the Year 1896, in the TUTBURY RURAL DISTRICT, classified according to Diseases, Ages, and Localities.

Names of Localities adopted for the purpose of these Statistics; public institutions being shown as separate localities. (Columns for Population and Births are in Table B.) (a)	Mortality from all causes, at subjoined ages.								Mortality from subjoined causes, distinguishing Deaths of Children under Five Years of Age.																					
	At all ages.	Under 1 year.	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards.		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
													Fevers.					Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia and Pleurisy.	Heart Disease.		Injuries.	All other Diseases.	Total.
													Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.													
(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)																							
Anslow, Rolleston, Tutbury, and Hanbury.. ..	52	16	2	3	1	15	15	Under 5																5					14	19
								5 upwards					1												6	9				
Barton, Dunstall, Wichnor, Branstone, Tatenhill, Outwoods, and Stretton ..	85	22	12	3	6	24	18	Under 5		1									5					4					21	31
								5 upwards		1											1	8	8	6						
Borough Hospital	9		6	2	1			Under 5		7																				7
								5 upwards		2																				
TOTALS	146	38	20	8	8	39	33	Under 5		8									5					9					35	57
								5 upwards		3				1									1	8	14	15				

Annual Report of Medical Officer of Health, 1896.

Rural Sanitary District of Tutbury.

(A) Deaths Registered during the year 1896, classified according to Diseases, Ages, and Localities ; showing also the Population of such Localities and the Births therein during the year.

Names of Localities adopted for the purpose of these Statistics: public institutions being shown as separate localities.	Population.		Registered Births.			Deaths from all causes at subjoined ages.									Mortality from subjoined causes, distinguishing deaths of Children under 5 years.																				
	Census, 1891.	Estimated to middle of 1896.	Males.	Females.	Total.	At all ages.			Under 1 year.	1 year and under 5.	5 years and under 15.	15 years and under 25.	25 years and under 65.	65 years and upwards.	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.					Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhea or Dysentery.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.	
						Males.	Females.	Total.											Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.												
Anslow, Rolleston, Tutbury and Hanbury	3884	3921	52	56	108	23	29	52	16	2	3	1	15	15	Under 5																5			14	
															5 upwards						1										6	9		17	
Barton, Dunstall, Wichnor, Branstone, Tatenhill, Outwoods, and Stretton	5147	5404	83	84	167	48	37	85	22	12	3	6	24	18	Under 5		1								5							4			21
															5 upwards		1												1	8	8	6		30	
Borough Hospital						2	7	9		6	2	1			Under 5		7																		
															5 upwards		2																		
TOTALS	9031	9325	135	140	275	73	73	146	38	20	8	8	39	33	Under 5		8								5							9			35
															5 upwards		3				1									1	8	14	15		47
Deaths occurring within the District among persons not belonging thereto which may be deducted from the above totals in estimating the rate of mortality						2	7	9																											

(Signed) KILDARE D. B. DOBBS, M.O.H.



B TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1896, in the TUTBURY RURAL DISTRICT, classified according to Diseases, Ages, and Localities.

Names of Localities adopted for the purpose of these Statistics; public institutions being shown as separate localities.	Population of all ages.		Registered Births.	Aged under 5 or over 5.	New Cases of Sickness in each Locality coming to the knowledge of the Medical Officer of Health.											Number of such Cases removed from their Homes in the several Localities for Treatment in Isolation Hospital.										
	Census 1891.	Estimated to middle of 1896			1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11
					Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.					Cholera.	Erysipelas.	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Fevers.					Cholera.	Erysipelas.
									Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.							Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.		
(a)	(b)	(c)	d.	(e)																						
Anslow, Rolleston, Tutbury and Hanbury	3884	3921	108	Under 5		5																				
				5 upwards		7	1							4												
Barton, Dunstall, Wichnor, Branstone, Tatenhill, Outwoods, and Stretton	5147	5404	167	Under 5		8																				
				5 upwards		19				2																
TOTALS	9031	9325	275	Under 5		13																				
				5 upwards		26	1			2					4											

Notification of Infectious Disease compulsory in the District since August, 1895.



ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH, 1896.

RURAL SANITARY DISTRICT OF TUTBURY.

B. New Cases of Infectious Sickness coming to the knowledge of the Medical Officer of Health during the year 1896, enumerating the Number of Houses Infected, the Total Number of Deaths, also the Number of Cases Treated and the Deaths that occurred in Infectious Hospitals.

		Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup.	Typhus Fever.	Enteric Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	Measles.	Whooping Cough.
Houses infected			20	1			2					4		
Total cases reported among persons belonging to District .. .	Under 5..		13											
	5 & upwds.		26	1			2					4		
Total deaths reported among persons belonging to District .. .	Under 5..		1										5	
	5 & upwds.		1				1							
Cases treated in Hospital among persons belonging to District .. .	Under 5..													
	5 & upwds.													
Deaths occurring in Hospital among persons belonging to District .. .	Under 5..													
	5 & upwds.													

Is " Notification of Infectious Diseases " Compulsory in the District? Yes. Since when? August 1st, 1895.

Is Measles included among the Diseases notified? No.

Is Whooping Cough ,, ,, ,, No.

Is an Isolation Hospital available for the District? No.

Area of District in acres? 25916.

Signed, KILDARE D. B. DOBBS, M.O.H.

Summary of Sanitary Work done in the Inspector of Nuisances' Department during the Year 1896, in the Rural Sanitary District of Tutbury.

	Inspect- ions and observa- tions made.	Formal Notices by Authority	Nuisances Abated after Notice.
Dwelling Houses and Schools—			
Foul Conditions	9		
Structural Defects	44		
Overcrowding			
Unfit for Habitation			
Lodging-houses			
Dairies and Milkshops			
Cowsheds	119		
Bakehouses			
Slaughter-houses	6		
Canal Boats			
Ashpits and Privies	115	3	3
Deposits of Refuse and Manure.. .. .	41		
Water Closets	4		
House Drainage—			
Defective Traps	43		
No Disconnection	47		
Other Faults	17		
Water Supply	19	4	4
Pigsties	38		
Animals improperly kept	32		
Offensive Trades			
Smoke Nuisances			
Other Nuisances	117		
TOTALS	651	7	7

Seizures of unwholesome Food—Nil
 Samples of Food taken for Analysis—Nil
 " " found Adulterated—Nil
 " of Water taken for Analysis—7
 " " condemned as unfit for use—3

PRECAUTIONS AGAINST INFECTIOUS DISEASE.

Lots of Infected Bedding Stoved or Destroyed—Nil
 Houses Disinfected after Infectious Disease—26
 Schools 4
 Prosecutions for not Notifying Existence of Infectious Disease—Nil
 Convictions Nil
 Prosecutions for Exposure of Infected Persons or Things Nil
 Convictions Nil

